| Effective December 8, 2004 09 1 8 3 7 4 7 9 | | | | | | | | | '~`a |
|--|-------------------------------|---------------------|-------------------------------|---------------------|--------------------|-------------------|--------|------------------|--------------|
| | | | LED - PART Column 1) | (Cotumn 2) | SMAL | TEMILA | | OTHE | RTHAN |
| TOTAL CLAIMS | | T | | | RAD | | | | ENTITY |
| FOR | | 145 | AMBER FLED | MUMBER EXTRA | | | 1_ | RATE | FEEE |
| TOTAL CHARGEABLE CLAIMS | | s | minus 20= | • | X 2 | | 10 | | 300.00 |
| INDEPENDENT CLAIMS | | | minus 3 = | • | | - | OR | | |
| MULTIPLE C | DEPENDENT CLAIR | 4 PRESE | | П | X100 | = | OR | X200= | |
| * If the difference in column 1 is to | | | 120 zem enter ' | | -180 | - | OR | +360= | |
| , | CLAIMS AS | | | | TOTA | ١ | OR | TOTAL | |
| 8/25/ | Column 1 | | (Column | | 31 SMAL | LENTITY | OR | OTHER SMALL E | |
| 4 P | CLAIMS. REMAINING AFTER | | HUGHE! | R PRESENT | | ADDI- | ſ | 7 | ADD1- |
| Total Independent | AMENDMENT | 4_ | PREVIOU PAID FO | OR | PATE | TIONAL | | RATE | TIONAL FEE |
| Total | 1.24 | Minus | - 30 | · - | XS 25= | 1 1 | OR. | X\$50= | |
| Independe | ESENTATION OF A | Minus ALE TIPLE | 0586W05VT C | - | X100= | | OR | X200= | $\neg \neg$ |
| | , | | DEPENDENT C | DUM | +180= | | - | +360= | |
| 1/2/ | N | | | | TOTAL | | ".L | | |
| 1/0/0/1 | (Column 1) | | (Column : | | ADDIT, FEE | | ··· AC | DOTT. FEEL | |
| | REMAINING AFTER | 1 | HIGHEST NUMBER PREVIOUS | PRESENT | RATE | ADDI- TIONAL | F | | ADDI- |
| Total Independent | AMENDMENT | - | PAID FOR | | The state of | FEE | | | FEE |
| Independent | | Minus Minus | 1-04 |) = | X\$ 28,2 | / 01 | R L | 350= |) |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TO THE X100= OR X200= | | | | | | | | | |
| +160= OR +360= | | | | | | | | | |
| | ٠. | | | | ADOIT, FEE | ОЯ | ADO | TOTAL (T. FEE | - |
| | (Column 1) | - | (Column 2) | (Column 3) | | | | | |
| Total Independent | CLAIMS REMAINING AFTER | | HIGHEST NUMBER | PRESENT | | ADDI- | Г | | 001- |
| | | | PREVIOUSLY PAID FOR | EXTRA | RATE T | TONAL FEE | R | | DNAL . |
| Total | | linus | | | X\$ 25= | OR | XS | 50- | |
| Independent | ENTATION OF MULI | linus rios e nei | | 1 | X100= | OR | X2 | 00= | 7 |
| | ALL MOU | WILE UE | PENUENI CLAIK | 4 | ₹180 = | | | | 1 |
| Did extra in c. 1 | 100 | 436 | | { | | | | | |
| Die 76chest No | mber freeinade fra 1 | ion file Tires | S SPACE & Mes ou | eu 50° 944 × .50°. | ADOIT. FEE | OR . | 4DOCT | FEE | |
| | bor Previously Paid Fo | ~ ficen or | morpendary is th | 4 highest number fo | rang pr gue etibag | iriale box in col | oma,1. | • • • | . 1 . |

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Parent and Tredunca Once, U.S. DEPARTMENT OF COUNTRICE